

**Edward Smith interview, 2014-12-19 : interview conducted by Michael Robert
Bussel**

INTERVIEW LOG

00:00:34: Lives in Salem, Oregon. Born in Detroit, Michigan in 1954.

00:01:05: Has been involved in caregiving off and on for 10-12 years. Babysat in high school. Became a phlebotomist in college and worked in private home care. Has been a forensic nurse. Also served in the military.

00:02:58: Most recently, got into home care through his wife. She is group leader for a client they serve. Majority of his time is spent as umpire, referee, and sports entrepreneur. Home care is convenient for his schedule and allows him to diversify things he does in his life.

00:03:57: Empathetic person. Caregiver for his mother. Window of opportunity to take care of client and have flexible work schedule. Came into field in Oregon at a time when pay raises occurred.

00:05:10: Previously cared for elderly man, who had suffered severe stroke and had to be lifted. Needed strength and flexibility to lift him. Job involved medical protocol, hospice protocol, functional protocol. Food had to be pureed and strained.

00:07:05: Current client is a paraplegic. Job requirements change. Pick up different skills. Monitor IVs. Colostomy and ileostomy bags must be emptied. Wound care monitoring. Sanitation and disease prevention. Work around clock as a team. Laundry must be done in a special manner.

00:09:12: Client is aware and has a personality. Must be counselor, psychologist. Fun to interact with client. Caregiver is an extension of client's disabilities.

00:12:43: Draws on his experience as a coach and referee. Challenge to keep a balance. It is both "interesting" and "tough."

00:13:27: Must be a good listener. Open to different views. If you and your client differ on politics, must learn to accommodate each other.

00:14:30: Important to remember that as caregiver, you are in another person's home. Must respect that.

00:15:35: Marine Corps background useful. "Yes sir, no sir," "do it your way." in dealing with client.

00:16:18: Bus rides a nightmare with client. Client can get distressed by little things.

00:17:52: Client often feels her rights are violated when traveling on bus. Makes a deal with her at bus stops. Gets on first, sizes up situation to make sure she will be comfortable once she boards. Option: catch next bus or walk. Caregivers must make accommodation.

00:19:13: Establish routine. Help client feel in control. Introduced client to Facebook. Got her a Christmas tree. Importance of little things. Go to restaurants, movies, ball games. Client hadn't done this in years. Expand interpersonal relationship and understand her better.

00:21:34: No conversation about future goals, although latent skills are there.

00:22:54: As caregiver, don't know what family dynamics will be. Family "interviews" you. Must develop positive relationship with them.

00:24:47: If you don't mesh with client, move on. Caregiver works at pleasure of client. Relationship can get strong. Become part of extended family. Invited client to family events. Not a job where you take weekends or holidays off.

00:26:23: Industry will balloon. People will want to stay in their homes.

00:27:45: Developed a "team concept" with their client. Added folks they knew to the team. Developed a log book.

00:30:04: Team concept build around scheduling, cooperation, sharing of information. His role is to do washing, vacuuming, day-to-day routine care.

00:31:19: Home care does not generally have a team concept. Can call in co-workers to fill in, if you are sick.

00:32:30: Asked if he would run for office by union and became district officer. Involved in phone calls, answering questions, coordination of effort. Union builds and develops home care

workers. A “maid” does not put IVs in you. Home care as a classification will expand and require accreditation.

00:35:23: Importance of knowing history of what has happened with client. Daily log book notes good days, bad days for client.

00:37:27: Folks want to know how to do the right thing for people in distress. Home care worker might come to resemble an LPN or CNA at some point.

00:40:10: Threshold you cross when person can make fun of themselves. Will have conflict with clients. Separate and then discuss issue. This is a skill many home care workers have. Distinguishes those who are “good” from those who are “really good.”

00:42:34: Intimacy: if you work in medical field, you become sensitive to it. Can be complicated with male caregiver, female client. Lines you don’t cross when dressing. “Girl talk is girl talk...certain rooms we don’t go in.” Client amused at my expense. Shows level of comfort.

00:44:20: Let them know what you are doing and why. Client has wounds. Paper towels...sees them as sanitation aid. Client is “old school” and prefers wash rags. Concern about transfer of germs. Bleach wipes well worth the cost.

00:47:08: Gratifying to keep client out of hospital. Teamwork has upgraded her level of health. Get her to her care. Don’t hesitate to call 911, if needed. People like little things. Catch crabs and bring some back. Bring pictures of boats for her to see. Special meals...share leftovers.

00:49:20: Flip side: days that don’t go well. Can’t bring client out of a funk.

00:51:08: Client asks to put covers back on, says her legs are cold. Jokes with her...“Why are your legs cold? You can’t walk!” Client says “I don’t know. They just get cold.” Moment we can share. Take light moments like this and make the best of them. Biggest thing is establishing trust.

00:52:50: Clients will tell you secrets. Have to keep them to yourself.

00:54:29: Psychological training comes in handy. Helps in understanding how the mind works.

00:55:48: Easy working as a couple with his wife in presenting themselves to clients. Family of one client “thought the world of them.” Went to funeral when this client died.

00:58:06: Active in life of client's family. Embody trust. Current client: invite her to place where his wife's family gathers. Client hangs out with them and has a good time. Helps with overcoming hurdles and does a world of good.

00:59:11: Union membership best thing for home care workers. Gives the occupation an identity. "In between jobs" not always recognized. Have made good strides with wages and health insurance. Ongoing effort to get legislature to enact policies that will help disabled.

01:02:37: Watches television with his client. They especially like "Bones." Union allows caregiver to be in this type of situation...validates it. Keep ranks of home care workers strong and have a voice in Salem.

01:08:46: BEEP IN TAPE.

001:10:06: Refers to story about a prosthetic device for an injured dog. Dog could run after new appendage was installed. Person who doesn't function well will need more accommodations. People can't imagine what it is like for a person who has a disability.

01:11:48: Client can't walk through the mall. Can't wear shoes and stand. Won't be able to dance. Adjustments needed to help her adapt. Joke about it.

01:12:48: Jokes about where how he could "lay hands" on her and she walks. People don't understand what it's like to lose their facility. Must always put yourself in their shoes. "I am her legs, her dancing shoes, her walking through the mall." Never tell client you know how they feel...you don't.

01:14:56: Workaholic. Teaches basketball officials. Officiates at sports events. Loves to be in an enterprise outside of work. Would like to go back to school.

01:16:40: Anyone who goes into home care in the future will need training and development. Must design a model and be in the forefront.

01:23:17: End of interview.